

FEE TRANSMITTAL

Complete if known

Application Number: 09/026,353

Filing Date: February 19, 1998

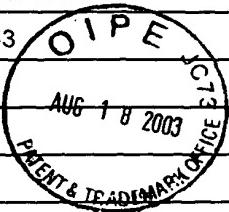
First Named Inventor: Argenta

Group Art Unit: 3736

Examiner Name: John P. Lacyk

Total Amt. of Payment: (1)+(2)+(3)= **\$750**

Attorney Docket Number: 0101-P00636US3



METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																					
1. The Commissioner is hereby authorized to: <input type="checkbox"/> Charge indicated fees <input checked="" type="checkbox"/> Charge additional fees <input checked="" type="checkbox"/> Credit overpayments to the account of DANN, DORFMAN, HERRELL & SKILLMAN Deposit Account Number <u>04-1406</u>		ADDITIONAL FEES Fee Description Surcharge-late filing fee or oath Surcharge - late provisional filing fee or cover sheet Extension for response within first month Extension for response within second month Extension for response within third month Extension for response within fourth month Notice of Appeal Filing a brief in support of an appeal Request for oral hearing Petition to revive unavoidably abandoned application Petition to revive unintentionally abandoned application Issue fee Petitions to the Commissioner Petitions related to provisional applications Submission of Information Disclosure Stmt. Recording each patent assignment per property Other fee (specify) <u>Advance Order (10 copies)</u> Other fee (specify) <u>Request for Continued Examination</u> <u>750.00</u>																					
2. Payment enclosed: Check in the amount of <u>\$750</u>																							
FEE CALCULATION																							
1. FILING FEE		Fee																					
Fee Description																							
Utility filing fee																							
Design filing fee																							
Plant filing fee																							
Reissue filing fee																							
Provisional filing fee																							
SUBTOTAL (1) <u>\$0</u>		SUBTOTAL (3) <u>\$750</u>																					
2. Claims																							
<table border="1"> <thead> <tr> <th></th> <th>Paid</th> <th>Extr</th> <th>Fee</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>-</td> <td>= 0</td> <td>x 18 = 0</td> </tr> <tr> <td>Independent Claims</td> <td>-</td> <td>= 0</td> <td>x 84 = 0</td> </tr> <tr> <td>Multiple Dependent (First presentation)</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="4">SUBTOTAL (2) <u>\$0</u></td> </tr> </tbody> </table>					Paid	Extr	Fee	Total Claims	-	= 0	x 18 = 0	Independent Claims	-	= 0	x 84 = 0	Multiple Dependent (First presentation)				SUBTOTAL (2) <u>\$0</u>			
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SUBTOTAL (2) <u>\$0</u>																							

Submitted By:

Typed or

Printed Name Niels Hahn

Reg. Number 48,488

Signature [Signature]

Date August 15, 2003

Deposit Account User ID

04-1406

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Fee Paid
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